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DECLARATION AND POWER OF ATTORNEY			Attorney Do	cket Number	JAB-1694
			First Named Inventor Jean F.A. Lacrampe et al.		
	ITY OR DESIGN			COMPLE	TE IF KNOWN
	APPLICATION CFR 1.63)		Application I	Number	
Declaration Submitted with Initial Filing	OR Initial Filing (Surch		Filing Date		
, initial , initig			Group Art U	nit	<u>-</u>
			Examiner Na	ame	
As a below named invento	r, I hereby declare tha	t:			
My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
	INTERLEUKIN-5 IN	HIBITING 6- (Title of the li		DERIVATIVES	
the specification of which					
is attached hereto					
OR .					
was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country		Filing Date D/YYYY)	Priority Not Claime	Certified Copy d Attached? YES NO
99870170.0 99126035.7	EP EP	1	6/1999 7/1999		
Additional foreign applic	ation numbers are liste	d on a supple	emental priorit	ty data sheet P	TO/SB/02B attached hereto:

Ihereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. Application Number(s)	DECLARATION - Utility or Design Patent Application					
I hereby claim the benefit under Tille 35, United States Code, §120 of any United States application (s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, lacknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1,56(g) which occurred between the filling date of the prior application and the national or PCT international filling date of this application: Application Serial No. Filling Date Status 10/ February 5, 2002 Pending I hereby appoint: Practitioners at Customer Number 000027777 — Place Customer Number Bar Code Label Here AND Practitioners at Customer Number Registration Number Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Address all telephone calls to Ellen Ciambrone Coletti at telephone number (732) 524-2359. Customer Number Direct all correspondence to:			pplication(s) listed below.			
the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application: Application Serial No. Filing Date Status 10/ February 5, 2002 Pending I hereby appoint: Practitioners at Customer Number 000027777 — Place Customer Number Bar Code Label Here AND Practitioner(s) named below: Registration Number Registration Number Registration identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Address all telephone calls to Ellen Clambrone Coletti at telephone number (732) 524-2359. Customer Number Direct all correspondence to: or Bar Code Label 000027777 OR - Correspondence address below Name: Address: Address: City: State: ZIP	Application Number(s)	Filing Date (MM/DD/YYYY)	numbers are listed on a supplemental priority data sheet			
Thereby appoint: Practitioners at Customer Number 000027777	the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the					
I hereby appoint: Practitioners at Customer Number 000027777 — Number Bar Code Label Here AND Practitioner(s) named below: Name Registration Number Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Address all telephone calls to Ellen Ciambrone Coletti at telephone number (732) 524-2359. Customer Number Direct all correspondence to: Or Bar Code Label O00027777 OR Correspondence address below Name: Address: Address: ZIP	Application Serial No.	Filing Date	Status			
Place Customer Number Bar Code Label Here AND Practitioner(s) named below: Name Registration Number Registration Number Registration Number Address all telephone calls to Ellen Ciambrone Coletti at telephone number (732) 524-2359. Customer Number Direct all correspondence to: One Bar Code Label One Bar Code Label	10/	February 5, 2002	Pending			
Practitioners at Customer Number 000027777 Number Bar Code Label Here AND Practitioner(s) named below: Name Registration Number Registration Number Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Address all telephone calls to Ellen Ciambrone Coletti at telephone number (732) 524-2359. Customer Number Direct all correspondence to:	I hereby appoint:					
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States Patent and Trademark Office connected therewith. Address all telephone calls to Ellen Ciambrone Coletti at telephone number (732) 524-2359. Customer Number —Direct all correspondence to:————————————————————————————————————						
Customer Number —Direct all correspondence to: —Or Bar Code-Label —O00027777 —OR —Correspondence address below Name: Address: City: State: ZIP						
	Address all telephone calls to Ellen Ciambrone (Coletti at telephone number (732) 524-2359.				
Address: City: State: ZIP						
Address: City: State: ZIP	Name:					
City: State: ZIP	Address:					
	Address:					
Country Telephone: Fax:	City:	State:	ZIP			
	Country Telephone: Fax:					

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:	E OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) Jean Fernand Arm	Family Name or Surname Lacrampe				
Inventor's Signature			Date	P	
Residence: City F-76240 Le Mesnil Esnard	State	Coun	try France	Citizenship France	
Mailing Address Janssen-Cilag S.A. 1, rue C	amille Desmoulins, TSA	A 91003, F-92787	' lssy-Les-Mouline	aus Cedex 9, France	
City Issy-Les-Moulineaux	State	ZIP I	-92787	Country France	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SECOND INVENTOR:	☐ A pe	etition has been fi	led for this unsign	ed inventor	
Given Name (first and middle [if any]) Eddy Jean Edgard Family Name or Surname Freyne					
Inventor's Signature			Date		
Residence: City B-2840 Rumst	State	Coun	try Belgium	Citizenship Belgium	
Mailing Address Janssen Pharmaceutica N.V	/., Turnhoutseweg 30, E	3-2340, Belgium			
City Beerse	State	ZIP I	3-2340	Country Belgium	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF THIRD INVENTOR:	☐ A pe	etition has been fi	led for this unsign	ed inventor	
Given Name					
Inventor's Signature			Date		
Residence: City B-9040 Sinit-Amandsberg	State	Coun	try Belgium	Citizenship Belgium	
Mailing Address Janssen Pharmaceutica N.V., Turnhoutseweg 30, B-2340 Beerse, Belgium					
City Beerse	State	ZIP E	3-2340	Country Belgium	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FOURTH INVENTOR:	NAME OF SOLE OR FOURTH INVENTOR: A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) Jérôme Michel Claude Family Name or Surname Fortin					
Inventor's Signature		-1	Date		
Residence: City F-27690 Lery	State	Country	France	Citizenship France	
Mailing Address Janssen-Cilag S.A. 1, rue C	amille Desmoulins, TSA	, 91003, F-92787 Iss	sy-Les-Moulinea	us Cedex 9, France	
City Issy-Les-Moulineaus	State	ZIP F-9	2787	Country France	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF FIFTH INVENTOR:	☐ A pe	etition has been filed	for this unsigne	d inventor	
Given Name (first and middle [if any]) Erwin		Family Name or Surname	Coesemans		
Inventor's Signature			Date		
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Mailing Address Janssen Pharmaceutica N.V., Tumhoutseweg 30, B-2340, Belgium					
City Beerse	State	ZIP B-2	340	Country Belgium	